

**CONTRACT/CONTRACTOR EVALUATION****OFFICE OF LEGAL SERVICES**

*This evaluation must be completed for all consulting services contracts \$5,000 and over within 60 days of completion of the contract. If performance by the contractor was unsatisfactory, a copy of the evaluation must be sent to the Department of General Services, Office of Legal Services, 707 Third Street, Suite 7-330, 7th Floor, West Sacramento, CA 95605 within five days after completion of the evaluation. The contractor must be notified and sent a copy of the unsatisfactory evaluation within fifteen days after its completion.*

CONTRACT NUMBER	AM. NO.
-----------------	---------

DEPARTMENT	CONTRACTOR'S NAME AND ADDRESS		
DIVISION			
EVALUATOR'S NAME			
TAXPAYER'S FEDERAL EMPLOYER IDENTIFICATION NUMBER	CONTRACT COMMENCEMENT DATE	CONTRACT EXPIRATION DATE	

1. TOTAL CONTRACT AMOUNT, INCLUDING AMENDMENTS

2. DESCRIBE SERVICE OR PRODUCT TO BE PROVIDED UNDER CONTRACT

3. IS THE SERVICE / PRODUCT BEING UTILIZED?

☐

NO - If no, explain why

☐

YES - If yes, explain how the product or service met the specific problem, administrative requirement, or program need which made the contract necessary.

4. DID THE CONTRACTOR FULFILL ALL REQUIREMENTS OF CONTRACT INCLUDING QUALITY STANDARDS?

☐

NO - If NO, explain

☐

YES

5. IF ANSWER TO ITEM 4 WAS NO, WAS CONTRACTOR NOTIFIED AND SENT A COPY OF THE EVALUATION?

☐

YES

☐

NO

6. TYPE OF BIDDING

☐

RFP/IFB

☐

SOLE SOURCE

7. EMPLOYEE TO BE CONTACTED REGARDING CONTRACTOR PERFORMANCE

8. TITLE

9. TELEPHONE NUMBER

10. EVALUATOR'S SIGNATURE

11. TITLE

12. DATE

13. TELEPHONE NUMBER

